09 CV 1116 DWF/RLE

APPENDIX
1

Fatigued Driving Evaluation Checklist

Inspector: Inspection #:

Carrier DOT #:	Driver Name:	Date of Examination:

Overall Truck Condition

- ☐ Exterior Dirty/Unkempt
- ☐ Vehicle Maintenance Not Performed
- ☐ Trailer Interior Dirty/Unkempt
- ☐ Obvious Lack of Overall Care
- ☐

Condition of Sleeper

- ☐ No Bedclothing & Blanket
- ☐ No Mattress
- ☐ Berth Does NOT Qualify as Sleeper Berth 393.76
- ☐ Items/Debris/Tools on Mattress
- ☐ Berth Obviously Unused
- ☐ Television in Berth - DVD's Video's
- ☐ Clothing In Berth
- ☐ Video game system
- ☐ Reading material - books, magazines, papers

Condition of Cab

- ☐ Debris in Cab
- ☐ Wastebasket Full/Overflowing
- ☐ Food or Food Wrappers in Cab
- ☐ Urine Bottle Present
- ☐ Clothing in Cab
- ☐ Empty Soda/Caffeinated Drink Cans/Bottles
- ☐ Pets in Vehicle
- ☐ Cell Phone
- ☐ Computer

Driving Behaviors

- ☐ Speed - Change Speed/No Apparent Reason
- ☐ Lane Position - Weaving
- ☐ Missed Turn
- ☐ Missed Red Light/Stop Sign/Etc.
- ☐ Fail To Respond To Traffic Situations
- ☐ Tailgating
- ☐ Unnecessary Braking
- ☐ Fail to Use Turn Signals
- ☐ Crash
- ☐ HOS Violation
- ☐ Log Not Current
- ☐ No Log Book Present
- ☐ False log
- ☐
- ☐

Driver Medical Condition

- ☐ Snoring
- ☐ Diagnosed with Sleep Apnea
- ☐ CPAP Machine
- ☐ Restless Leg Syndrome (RLS)
- ☐ Acid Reflux Condition
- ☐ Dental Problems
- ☐ Grinding of Teeth (Bruxism)
- ☐ Active dreams
- ☐ Sleepwalking

Driver Physical Condition

- ☐ Driver: Dirty/Disheveled
- ☐ Unshaven
- ☐ Lack of Attention/Unable to Maintain Focus
- ☐ Eyes: Bloodshot
- ☐ Eyes: Watery/Tearing
- ☐ Yawns During Interview
- ☐ Clothing: Dirty/Disheveled
- ☐ Driver Ill
- ☐ Head Bobbing
- ☐ Droopy Eyelids
- ☐ Distant Stare
- ☐ Use of OTC Medications
- ☐ Use of Prescription Meds
- ☐ Use of Contraband Substances
- ☐ Alcohol Detected
- ☐ Job/Home related stress
- ☐ Appears Irritable
- ☐ Allergies
- ☐ Use of Caffeine or Stimulants
- ☐ Noticeable Body Odor
- ☐ Money concerns
- ☐ Physical movements/ rubbing head, face, eyes
- ☐ Easily confused or slow to respond
- ☐ Overly agreeable - Overly quick to agree
- ☐

_____ Total Hours of Last Sleep Period
_____ Total Hours of Sleep Last 24 Hrs
_____ Hours since Last Sleep Period

Hours Since Last Rest Stop/Bathroom Break

Driver Height
Driver Weight
Driver Neck Size

	DRIVER: Rate your Alertness Level	Notes:
1	☐ Completely Alert	
2	☐	
3	☐	
4	☐	
5	☐ Moderately Tired	
6	☐	
7	☐	
8	☐	
9	☐	
10	☐ Extremely Tired/Worn Out	

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